B1 (Official Form 1)(12/11)								
United S					Voluntary Petiti	on		
Name of Debtor (if individual, enter Last, First, Johns, Larry David	i		ebtor (Spouse an Lofranc	e) (Last, First, CO	Middle):			
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): FDBA L&L Services	B years		(includ		maiden, and	Joint Debtor is trade names):	the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)	yer I.D. (ITIN) No./C	Complete EIN	(if more	our digits o	nll)	r Individual-T	uxpayer I.D. (ITIN) No./Comple	te EIN
Street Address of Debtor (No. and Street, City, a 1051 Apple Court #A Hollister, CA	and State):	ZIP Code	105		Court #A	(No. and Stre	et, City, and State): ZIP 0	Code
		95023	1				95023	
County of Residence or of the Principal Place of San Benito	f Business;		Sar	n Benito		-	e of Business:	
Mailing Address of Debtor (if different from stre	eet address):		Mailin	g Address	of Joint Debt	or (if differen	from street address):	
	 -	ZIP Code					ZIP C	Code
Location of Principal Assets of Business Debtor (if different from street address above):	J		<u> </u>				<u> </u>	
Type of Debtor (Form of Organization) (Check one box)	1	f Business one box)			•	-	ey Code Under Which	
(Form of Organization) (check the box) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Health Care Bus ☐ Single Asset Rei in 11 U.S.C. § 1 ☐ Railroad ☐ Stockbroker ☐ Commodity Bro ☐ Clearing Bank	siness al Estate as dei 01 (51B)	fined	☐ Chapt☐	er 7 er 9 er 11 er 12	☐ Chi of a ☐ Chi	npter 15 Petition for Recognition Foreign Main Proceeding opter 15 Petition for Recognition Foreign Nonmain Proceeding	
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Other Tax-Exempt Entity			defined "incurr		(Check onsumer debts,		ily
Filing Fee (Check one box) Full Filing Fee attached Full Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. Check one box: Chapter 11 Debtors Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affi are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years the Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors,								
in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information *** David A. Boone 74165 *** Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					(
Estimated Number of Creditors	1,000- 5,001- 5,000 10,000	□ □ 10,001- 25,	001- 000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$ \$50,000 \$100,000 \$500,000 to \$1	51,000,001 510,000,001 to \$50 million million	\$50,000,001 \$10 to \$100 to \$	500	5500,000,001 to \$1 billion	More than \$1 billion			
\$0 to \$50,001 to \$100,001 to \$500,001	☐ ☐ ☐ S10,000,001 S10,000,001 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		0,000,001 500 El	5500,000,001 151 billion	More than	3 17:11:	40 Page 1 of 88	

Page 2 B1 (Official Form 1)(12/11) Name of Debtor(s): Voluntary Petition Johns, Larry David Johns, Livian Lofranco (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Date Filed: Case Number: Location Where Filed: - None -Date Filed: Case Number: Location Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Date Filed: Case Number: Name of Debtor: - None -Judge: Relationship: District: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice required by 11 L.S.C. §342(b). and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) David A. Boone 74165 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. 口 Ca Bebtof Segification the Shophas server the Handloyd with this certification (1)1/55/18364(1)1 1·40

B1 (Official Form 1)(12/11) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Johns, Larry David

Johns, Livian Lofranco

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Signature of Joint Debtor Livian Lofranco Johns

X Signature of Joint Debtor Livian Lofranco Johns

Telephone Number (If not represented by attorney)

01/14/13 Date\

Signature of Attorney*

Signature of Attorney for Debtor(s)

David A. Boone 74165

Printed Name of Attorney for $\overline{\text{Debtor}(s)}$

Law Offices of David A. Boone

Firm Name

1611 The Alameda San Jose, CA 95126

Address

408-291-6000 Fax: 408-291-6016

Telephone Number

114/2013

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Case: 13-50253 Doc# 1 Filed: 01/15/13

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- □ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of California

In re	Larry David Johns Livian Lofranco Johns		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- E12. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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Best Case Bankruptcy

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□4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

□Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

□Active military duty in a military combat zone.

□5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: Larry David Johns

Date: 01/14/13

Certificate Number: 03088-CAN-CC-020045031



CERTIFICATE OF COUNSELING

I CERTIFY that on January 13, 2013, at 9:59 o'clock PM CST, Larry D Johns received from Debt Education and Certification Foundation, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: January 13, 2013 By: /s/Brian J Alcorn Name: Brian J Alcorn Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of California

In re	Larry David Johns Livian Lofranco Johns		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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□4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

□Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

□Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

□Active military duty in a military combat zone.

□5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: Livian Lofranco Johns

Date: 1-14-13

Certificate Number: 03088-CAN-CC-020045032



CERTIFICATE OF COUNSELING

I CERTIFY that on January 13, 2013, at 9:59 o'clock PM CST, Livian L Johns received from Debt Education and Certification Foundation, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

January 13, 2013 /s/Brian J Alcorn Date: By: Name: Brian J Alcorn Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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United States Bankruptcy Court Northern District of California

In re	Larry David Johns,		Case No.		
	Livian Lofranco Johns				
_		Debtors ,	Chapter	13	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	5,500.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	29		108,091.13	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			5,216.08
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,140.92
Total Number of Sheets of ALL Schedu	les	44			
	To	otal Assets	5,500.00		
			Total Liabilities	108,091.13	

United States Bankruptcy Court Northern District of California

In re	Larry David Johns,		Case No		_
	Livian Lofranco Johns				
_		Debtors	Chapter	13	_

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Linbility	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 16)	5,216.08
Average Expenses (from Schedule J, Line 18)	5,140.92
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	6,078.87

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		108,091.13
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		108,091.13

7	
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Case No.	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's
Interest in Property

Husband,
Wife,
Joint, or
Community
Property, without
Secured Claim
Claim or Exemption

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

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Case No.	

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	x		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account with Chase In Debtor's Possession.	J	300.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	х		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods, Furnishings In Debtor's Possession.	J	1,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	х		
6.	Wearing apparel.	Work and Casual Clothes In Debtor's Possession.	J	500.00
7.	Furs and jewelry.	Watches, Rings. Misc Jewelry In Debtor's Possession.	J	500.00
8.	Firearms and sports, photographic, and other hobby equipment.	Guns Ruger 22 Rifle - \$150.00 Riger 22 Pistol - \$400.00 Shotgun - \$300.00 Ruger P91 - \$300.00 Smith and Weson 357 - \$300.00 In Debtor's Possession.	J	1,450.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
		· ·	Sub-Tota	1 > 4,250.00

Sub-Total > 4,250.00 (Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

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In re	Larry David Johns,
	Livian Lofranco Johns

Case No.	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	x			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Х			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	х			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > 0.00 (Total of this page)

Sheet 1 of 3 continuation sheets attached to the Schodule of Personal Personal Personal

In re	Larry David Johns,
	Livian Lofranco Johns

Case No.		

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20 In	01 Ford Explorer 279k miles Debtor's Possession.	J	500.00
		19 In	91 Toyota 4Runner 280k miles Debtor's Possession.	J	750.00
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.	Х			
30.	Inventory.	Х			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			

Sub-Total > 1,250.00 (Total of this page)

Sheet $\underline{}$ of $\underline{}$ continuation sheets attached

35. Other personal property of any kind not already listed. Itemize.

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In re	Larry David Johns, Livian Lofranco Johns	Case No.			
		SCHEDULE	Debtors E B - PERSONAL PROPERTY (Continuation Sheet)	<i>r</i>	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Sub-Total > 0.00 (Total of this page) 5,500.00 Total >

Sheet 3 of 3 continuation sheets attached to the Schedule of Personal Property Case: 13-50253

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Case No		

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafte
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
III II S C 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C Checking Account with Chase In Debtor's Possession.	ertificates of Deposit C.C.P. § 703.140(b)(5)	300.00	300.00
Household Goods and Furnishings Household Goods, Furnishings In Debtor's Possession.	C.C.P. § 703.140(b)(3)	1,500.00	1,500.00
<u>Wearing Apparel</u> Work and Casual Clothes In Debtor's Possession.	C.C.P. § 703.140(b)(3)	500.00	500.00
<u>Furs and Jewelry</u> Watches, Rings. Misc Jewelry In Debtor's Possession.	C.C.P. § 703.140(b)(4)	500.00	500.00
Firearms and Sports, Photographic and Other Hob Guns Ruger 22 Rifle - \$150.00 Riger 22 Pistol - \$400.00 Shotgun - \$300.00 Ruger P91 - \$300.00 Smith and Weson 357 - \$300.00 In Debtor's Possession.	<u>by Equipment</u> C.C.P. § 703.140(b)(5)	1,450.00	1,450.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2001 Ford Explorer 279k miles In Debtor's Possession.	C.C.P. § 703.140(b)(2)	500.00	500.00
1991 Toyota 4Runner 280k miles In Debtor's Possession.	C.C.P. § 703.140(b)(5)	750.00	750.00

5,500.00

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Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	_	—						
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H H H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COX+-ZGEZH	08-1-00-04-mo	ローのセント世口	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
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Account No.								
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Total 0.00 0.00 (Report on Summary of Schedules)					0.00			

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Case No	

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian."

Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule, Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief, 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re

Larry David Johns, Livian Lofranco Johns

Case No.	

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT w INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM J AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER (See instructions.) **Notice Only** Account No. Board of Equalization, State of CA 0.00 Acct Analysis Ctrl Sec MIC: 29 P.O. Box 92879 J Sacramento, CA 94279-0029 0.00 0.00 **Notice Only** Account No. Franchise Tax Board 0.00 Special Procedures PO Box 2952 Sacramento, CA 95812 0.00 0.00 **Notice Only** Account No. Internal Revenue Service 0.00 PO Box 7346 Philadelphia, PA 19101-7346 J 0.00 0.00 **Notice Only** Account No. State of California - EDD 0.00 Bankruptcy Unit - MIC 92E PO Box 826880 Sacramento, CA 94280 0.00 0.00 **Notice Only** Account No. U.S. Attorney General 0.00 Civil Trial Sec. Western PO Box 683 Ben Franklin Washington, DC 20044 0.00 0.00 Subtotal 0.00 of 2 continuation sheets attached to

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Schedule of Creditors Holding Unsecured Priority Claims

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Case No.		

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

							TYPE OF PRIORITY	7
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	DEBT	H W J C	Sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	ZMBZTHZONZ	DZLLGDLDAHED	ローの中コト田口	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY AMOUNT ENTITLED TO PRIORITY
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In re	Larry David Johns,		Case No.
	Livian Lofranco Johns		
		Debtors	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	HL	sband, Wife, Joint, or Community	S	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	DZT _ ZGWZ	DUTCOTOR		AMOUNT OF CLAIN
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Accounts Receivable Management PO Box 129 Thorofare, NJ 08086-0129		J			וו		0.00
Account No.		 	Collection Agent for MCI			1	0.00
AFNI, Inc 404 Brock Drive PO Box 3517 Bloomingtoπ, IL 61702-3517		J					0.00
Account No. 9676 Allergy and Asthma Associates 4050 Moorpark Ave San Jose, CA 95117-1840		J	Medical Services				
							49.38
Account No. Allied Interstate 3000 Corporate Exchange Dr, 5th Floor Columbus, OH 43231		J	Collection Agent for HSBC Bank		1		0.00
28 continuation sheets attached			(Total of	Sub			49.38

In re	Larry David Johns,	Case No.
_	Livian Lofranco Johns	

CREDITOR'S NAME, MADLING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 4184019927 American Medical Collection Agency PO Box 1225 Elmeford, NY 10523-0935 Medical Services American Medical Response P.O. Box 3429 Modesto, CA 95353 Medical Services Medical Services Medical Services Medical Services Medical Services Account No. Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. Account No. Account No. Account No. Account No. Account No. Balanced Healthcare Receivables PO Box 7852 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9677 Subtotal Creditors Holding Unsecured Nosporiority Claims Account Nosporiority Claims DATE CLAIM Valenc								_
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Modesto, CA 95353 287.22 Account No.			١.			-		
Account No. Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Medical Services Medical Services J Collection Agent for Quest Diagnostics J Collection Agent for Quest Diagnostics Subloial 462 22			ľ					
Account No. Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. At Ta T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Manchester, NH 03108-9577 Sublotal Medical Services Acrount No. Collection Agent for Quest Diagnostics Sublotal Account No. Sublotal	Modesto, CA 95353							
Account No. Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. At Ta T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Manchester, NH 03108-9577 Sublotal Medical Services Acrount No. Collection Agent for Quest Diagnostics Sublotal Account No. Sublotal								
Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of J J Services Rendered Collection Agent for Quest Diagnostics Subtotal 462.22			ŀ					287.22
930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of J J Services Rendered Collection Agent for Quest Diagnostics Subtotal 462.22	Account No.			Medical Services		-		
930 Sunnyslope Rd, #E1 Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of J J Services Rendered Collection Agent for Quest Diagnostics Subtotal 462.22		1						
Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal	Aslam Barra, MD							
Hollister, CA 95023 Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 175.00 Collection Agent for Quest Diagnostics 0.00 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal	930 Sunnyslope Rd, #E1		J					
Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Account No. Services Rendered Collection Agent for Quest Diagnostics Sublotal 462.22					1	1		
Account No. AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal Services Rendered Collection Agent for Quest Diagnostics 0.00 Sheet no. 1 of 28 sheets attached to Schedule of	1101112011 011 00000		İ					
AT&T P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal J O.00 Account No. Sheet no. 1 of 28 sheets attached to Schedule of								175.00
P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of J Collection Agent for Quest Diagnostics 0.00 Subtotal	Account No.			Services Rendered	+	+	╁	
P.O. Box 78522 Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of J Collection Agent for Quest Diagnostics 0.00 Subtotal		7						
Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 0.00	AT&T	1						
Phoenix, AZ 85062-8522 Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of O.00 Collection Agent for Quest Diagnostics 0.00 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal	P.O. Box 78522		J		-			İ
Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of O.00					1	1		
Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal Collection Agent for Quest Diagnostics 0.00	1 11001111, 112 00002 0022			<u> </u>				
Account No. Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal Collection Agent for Quest Diagnostics 0.00								0.00
Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22	Account No.	+	-	Collection Agent for Quest Diagnostics	+	-	╁	
PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22	Account 140,	\dashv		Outcome Agent for wheat Diagnostics				
PO Box 9577 Manchester, NH 03108-9577 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22	Balanced Healthcare Receivables							
Manchester, NH 03108-9577 0.00 Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22		-	IJ					
Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22			1					
Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22	Matichester, NH 03100-33//							
Sheet no. 1 of 28 sheets attached to Schedule of Subtotal 462.22					-			
462.22						1		0.00
452.22	Sheet no. 1 of 28 sheets attached to Schedule of	f	4		Sut	tot	al	400.00
A JEROMAN COMPUNE ANNOUNCE DE DE MARIE DE MARIE DE LA COMPUNE DE LA COMP	Creditors Holding Unsecured Nonpriority Claims			(Total of	this	กล	gel	462.22

ln re	Larry David Johns,							
	Livian Lofranco Johns							

Case No.		

CREDITOR'S NAME,	C	Нμ	sband, Wife, Joint, or Community	S	Ü	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 1 M		OZF - ZGEZ	180100104F	SPUTED	AMOUNT OF CLAIM
Account No. 5140217999862725			Opened 1/24/06 Last Active 7/02/07 Credit Card Debt (Unsecured)	7	E		,
Barclays Bank Delaware Attention: Bankruptcy Po Box 1337 Philadelphia, PA 19101		J	Credit Card Debt (Offsecured)				0.00
Account No.			Collection Agent for American Medical	┧		ļ	
Bay Area Credit Service 1901 W. 10th St Antioch, CA 94509		J	Response				
							0.00
Account No.			Sales Tax				
Board of Equalization, State of CA Acct Analysis Ctrl Sec MIC: 29 P.O. Box 92879 Sacramento, CA 94279-0029		J			i		
							10,860.55
Account No.			Collection Agent for The Swiss Colony				. •
Bonded Collection Corp PO Box 1022 Wixom, MI 48393-1022		J					
							0.00
Account No.			Collection Agent for Washington Mutual Bank				
Bryant Hodge & Associates 20 State St, Ste 100 Bangor, ME 04401		J					
							0.00
Sheet no. 2 of 28 sheets attached to Schedule of				Subt		- 1	10,860.55
Sheet no. 2 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t			- 1	10,860.55

L	arry	David	Joh	ns,
L	ivian	Lofra	nco	Johns

Case No.		

CREDITOR'S NAME,	Ċ	Hu	sband, Wife, Joint, or Community	Ğ	ñ	ŗ	ēΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	1 A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINUENT			SPUTED	AMOUNT OF CLAIM
Account No. 0135205			Medical Services	T	E			
CalPath Medical Associates PO Box 54066 San Jose, CA 95154		J			D			115.45
Account No.			Medical Services					
Calvin Clarke DDS 890 Sunset Dr, Ste A-1B Hollister, CA 95023-5061		J						237.78
Account No. 671942			Opened 2/01/12	<u> </u>	<u> </u>	T	┪	
Capio Partners Lic 2222 Texoma Pkwy Ste 150 Sherman, TX 75090		Н	Collection Agent for Good Samaritan Hospital					481.00
Account No. 5178057282963995			Opened 7/01/08 Last Active 12/03/12	\vdash	_	H	+	
Capital One Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130		W	Credit Card Debt (Unsecured)					2,077.00
Account No. 2679306		\dashv	Opened 7/01/09	H	_	┢	†	
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital					7,941.00
Sheet no. 3 of 28 sheets attached to Schedule of			S	ubt	ota	.1	†	40.052.22
Creditors Holding Unsecured Nonpriority Claims			(Total of the	nis _l	pag	;e)	ιL	10,852.23

In re	Larry David Johns,	Case No
	Livian Lofranco Johns	•

CREDITORIC MAME	С	Hu	sband, Wife, Joint, or Community	1 6	Į	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODE BETOR	H & J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		ון ו ט ע	. 15	AMOUNT OF CLAIM
Account No. 2649400 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 1/01/09 Collection Agent for Hazel Hawkins Memorial Hospital		TEC		5,735.00
Account No. 2632114 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 10/01/08 Collection Agent for Hazel Hawkins Memorial Hospital				2,626.00
Account No. 2679305 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 7/01/09 Collection Agent for Hazel Hawkins Memorial Hospital				768.00
Account No. 2628509 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		J	Opened 9/01/08 Collection Agent for Hazel Hawkins Memorial Hospital				411.00
Account No. 2560585 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 4/01/07 Collection Agent for Hazel Hawkins Memorial Hospital .		- Luni		385.00
Sheet no. 4 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	of	I	(Total of	Sub this			9,925.00

In re	3

Case No.	

Debtors

CREDITOR'S NAME.	C	Ηι	usband, Wife, Joint, or Community] <u>c</u>	ŭ	l D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H ⊗ T	CONSIDERATION FOR CLAIM. IF CLAIM	COZH-ZGWZH	20000	DISPUTED	AMOUNT OF CLAIM
Account No. 2733145		Г	Opened 7/01/10] 	T E		1 11411
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital		D		307.00
Account No. 2639996	 	╀	Opened 11/01/08	-	⊬	\vdash	307.00
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		H	Collection Agent for Hazel Hawkins Memorial Hospital				287.00
Account No. 2708530		 	Opened 2/01/10	H		-	
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915))	Н	Collection Agent for Hazel Hawkins Memorial Hospital			i	235.00
Account No. 2646136	П		Opened 1/01/09	H	Н		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital				210.00
Account No. 2540989		$\vdash \dashv$	Opened 12/01/06	H		\vdash	210.00
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital				200.00
Sheet no. 5 of 28 sheets attached to Schedule of			S	ubto	otal	<u> </u>	1,239.00
Creditors Holding Unsecured Nonpriority Claims			(Total of th	iis p	ag	e)	1,239.00

In re	Larry David Johns,
	Livian Lofranco Johns

Case No.	

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 2660834 Cbc/credit Consulting Husband, Wife, Joint, or Community H W J C DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIS SUBJECT TO SETOFF, SO STATE Opened 4/01/09 Collection Agent for Hazel Hawkins Mem Hospital	TNA	CONTINUEST	UNLIQUIDATED	SPU	
Collection Agent for Hazel Hawkins Mem		E	D D	E	AMOUNT OF CLAIM
Collection Agent for Hazel Hawkins Mem		Ť	֟֟֟֝֟֟֝֟֝֟		
Po Box 5879 Salinas, CA 93915	orial	:	Ď		180.00
Account No. 2696176 Opened 11/01/09		\dashv	+		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915	orial				
					173.00
Account No. 2670317 Opened 5/01/09			-		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915 Collection Agent for Hazel Hawkins Mem-Hospital	orial				
					155.00
Account No. 2799183 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915 Opened 11/01/11 Collection Agent for Hazel Hawkins Memory Hospital	orial				
					149.00
Account No. 2799184 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915 Opened 11/01/11 Collection Agent for Hazel Hawkins Memory Hospital	orial				145.00
				Щ	140.00
Sheet no. 6 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims (To	Su stal of thi	abto is pa			802.00

Case: 13-50253 Doc# 1 Filed: 01/15/13 Entered: 01/15/13 17:11:40 Page 28 of 88 апклирису

I	n	re	
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Case No.	
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Debtors

	С	Тн	isband, Wife, Joint, or Community	С	U	To	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBLOK	H W	DATE OF AIM WAS DICHEDED AND	COZT-ZGHZ	0 - 0	I SPUTED	
Account No. 2696177			Opened 11/01/09	7	A T E D		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital		D		144.00
Account No. 2673686			Opened 6/01/09				
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital	· ·			129.00
Account No. 2646137		L	Opened 1/01/09	+-	ļ		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		H	Collection Agent for Hazel Hawkins Memorial Hospital	70074			119.00
Account No. 2839760		-	Opened 10/01/12	╁	\vdash	T	
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		w	Collection Agent for Hazel Hawkins Memorial Hospital				114.00
Account No. 0705954		ļ	Opened 2/04/44	┢		-	
Account No. 2765854 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 3/01/11 Collection Agent for Hazel Hawkins Memorial Hospital				109.00
Sheet no. 7 of 28 sheets attached to Schedule of				Subi			615.00
Creditors Holding Unsecured Nonnriority Claims			(Total of t	his	nae	re)	1

In re	Larry David Johns,
	Livian Lafranca John

Case No	

	С	Ты	sband, Wife, Joint, or Community	Tc	Īυ	Б	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	7 H M	DATE CLAIM WAS INCUDED AND	 	Z L L C D L D A	DISPUTED	AMOUNT OF CLAIM
Account No. 2802491			Opened 12/01/11	٦T			
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		н	Collection Agent for Hazel Hawkins Memorial Hospital		D		100.00
Account No. 2696175	<u> </u>	┢	Opened 11/01/09			<u> </u>	
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		н	Collection Agent for Hazel Hawkins Memorial Hospital				05.00
					<u> </u>		95.00
Account No. 2699783 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 12/01/09 Collection Agent for Hazel Hawkins Memorial Hospital				93.00
	ļ	-	One and 4 (M4)(4)	+	\vdash		30.00
Account No. 2807541 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 1/01/12 Collection Agent for Hazel Hawkins Memorial Hospital				84.00
Account No. 2540994	_	ļ	Opened 12/01/06	+-	-	$\vdash \mid$	J-15144
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital				77.00
Sheet no. 8 of 28 sheets attached to Schedule of	<u> </u>	_		 Subi	lota	;	440.55
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	e)	449.00

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L	ar r y	David	Joh	ns,
L	ivian	Lofra	псо	Johns

Case No.	

CREDITOR'S NAME,	C	HL	sband, Wife, Joint, or Community	Ğ	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C T M		ZM02-1200		DISPUTED	AMOUNT OF CLAIM
Account No. 2649398		Γ	Opened 1/01/09] ⊤	T		
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		H	Collection Agent for Hazel Hawkins Memorial Hospital		0		76.00
Account No. 2679308			Opened 7/01/09			Γ	
Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Collection Agent for Hazel Hawkins Memorial Hospital				
							66.00
Account No. 2560581 Cbc/credit Consulting Po Box 5879 Salinas, CA 93915		Н	Opened 4/01/07 Collection Agent for Hazel Hawkins Memorial Hospital				51.00
Account No. 03-89815533		Г	Collection Agent for Verizon Wireless	П			
CBCS PO Box 163250 Columbus, OH 43216-3250		J					0.00
Account No.	\dashv		Collection Agent for OConnor Hospital	Н		П	
CBSJ Financial Corp Department 370 PO Box 4115 Concord, CA 94524		J	- -				0.00
Sheet no. 9 of 28 sheets attached to Schedule of	_		S	ubt	otal		193.00
Creditors Holding Unsecured Nonpriority Claims			(Total of the	is r	ag	e)	193.00

In re	Larry David Johns,
	Livian Lofranco John

Case No.		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 1 H H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXHINGENT		ローの中して出口	AMOUNT OF CLAIM
Account No. 8006689059 Cbsj Financial Corp. 99 W Tasman Dr San Jose, CA 95134		W	Opened 11/01/06 Collection Agent for Cvi Santa Clara/Csc-02/00106	T	TED		94.00
Account No. 5854302 CBSJ Financial Corp. 99 W. Tasman Drive Suite 205 San Jose, CA 95134		J	Collection Agent				344.81
Account No. H00006808927 CBSJ Financial Corp. P.O. Box 512020 Los Angeles, CA 90051-0020		J	Collection Agent				816.75
Account No. Cs2-026512035701-00106 CBSJ Financial Corp. 99 W. Tasman Drive Suite 205 San Jose, CA 95134		J	Collection Agent				0.00
Account No. Cs2-02-6512035701-00106 CBSJ Financial Corp. 299 Stockton Avenue San Jose, CA 95126		J	Collection Agent				0.00
Sheet no. 10 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Sub this			1,255.56

Software Copyright (c) 1955-2017-3 CCH INCORPORATED - WW. bestcase.com | Case: 13-50253 | Doc#1 | Filed: 01/15/13 | Entered: 01/15/13 | 17:11:40 | Page 32-of 88 | Eankruptcy

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Larry	David	Joh	ns,	
Livian	Lofra	nco	Johr	ıs

Case No.	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR CREDITOR'S NAME. JOKH-ZGEZH MAILING ADDRESS Н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE. W CONSIDERATION FOR CLAIM. IF CLAIM C AND ACCOUNT NUMBER AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. Services Rendered **Charter Communications** J 8120 Camino Arroyo Gilroy, CA 95020-7304 0.00 Account No. 5416577152502542 Opened 6/06/06 Last Active 8/21/07 Credit Card Debt (Unsecured) Chase Attn: Bankruptcy Dept J Po Box 15298 Wilmington, DE 19850 0.00 Opened 5/01/03 Last Active 1/09/09 Account No. 5120121650106675 Credit Card Debt (Unsecured) Chase Manhattan Bank W Attention: Bankruptcy Po Box 15298 Wilmington, DE 19850 0.00 Account No. 8316370762413 Collection Agent for SBC Pacific Bell Collection Bureau of America J P.O. Box 5013 Hayward, CA 94540-5013 903.88 Account No. H00006808927 Collection Agent for Saint Louise Regional Hospital Computer Collections J 640 West Fourth Street PO Box 5238 Winston Salem, NC 27113-5238 0.00 Sheet no. 11 of 28 sheets attached to Schedule of Subtotal 903.88 Creditors Holding Unsecured Nonpriority Claims (Total of this page)

In re	Larry David Johns,	Case No.	
	Livian Lofranco Johns		
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CDEDITODIC MAME	Ç	Hu	sband, Wife, Joint, or Community	Ç	Ų	p	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 1 H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH-ZGMZ	70-CD-LZ		AMOUNT OF CLAIM
Account No. 08 0368 16545			Collection Agent for Quest	7	T		
Credit Collection Services Two Wells Ave Newton Center, MA 02459		J			D		0.00
Account No. 2601339	┝	-	Collection Agent for Hazel Memorial Hospital	+	╁		
Credit Consulting Services P.O. Box 5879 Salinas, CA 93915		J					43.66
A			O	1	-		43.00
Account No. 1686072455 Credit Protection Associations Attn: Bankruptcy Po Box 802068		Н	Opened 6/01/12 Collection Agent for Charter Communications				
Dallas, TX 75380							66.00
Account No.	_		Services Rendered	+	<u> </u>		
Crossings Book Club P.O. Box 916432 Indianapolis, IN 46291-6432		j			!		
							0.00
Account No. Cypress Collection Services PMB -184 3900 Peland Ave, #420 Modesto, CA 95356		J	Collection Agent for Radiological Assoc Med Group				
1110400101 011 00000							0.00
Sheet no. 12 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Subi his			109.66

In re	Larry David Johns,
	Livian Lofranco John

Case No.	

Debtors

	Ta	Т		16	111	In	1
CREDITOR'S NAME,	ğ		sband, Wife, Joint, or Community	- CON	N	I D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	7 C	CONSIDERATION FOR CLAIM. IF CLAIM	T I NG E N	l		AMOUNT OF CLAIM
Account No.		Г	Medical Services	7	E		
David R Flemming MD 757 Pacific St Monterey, CA 93940-2819		J			D		50.84
Account No. 7GI137682	t	H	Collection Agent for Verizon	+	T	T	
E R Solutions, Inc. P.O. Box 9004 Renton, WA 98057-9004		J			PROCESS OF THE PROCES		
							772.25
Account No. 56609 05009			Medical Services				
Endoscopy Surgery Center of Silicon Valley LLC 2410 Samaritan Drive, Ste 100 San Jose, CA 95124		J					
	_	L		1		<u> </u>	170.00
Account No. 48583242 Enhanced Recovery Corp Attention: Client Services 8014 Bayberry Rd Jacksonville, FL 32256		н	Opened 3/01/11 Collection Agent for At T				
·							794.00
Account No. 20-761690-5	1		Services Rendered				
FC&A PO Box 2062 Peachtree City, GA 30269-0062		J					
							40.96
Sheet no. 13 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims (Total of this page)				1,828.05			

Larry	David J	ohns,	
Livian	Lofran	co John:	s

Case No.	

CREDITOR'S NAME,		Ни	sband, Wife, Joint, or Community	Ţġ	Ü	T	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. 6845590	CODEBTOR	H W J G		COZH-ZGEZH			SPUTED .	AMOUNT OF CLAIM
Financial Credit Network 1300 W. Main Street Visalia, CA 93278		J						0.00
Account No. 4239801024826329 Fncc/Legacy Visa Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117		н	Opened 7/31/08 Last Active 1/07/09 Credit Card Debt (Unsecured)			***************************************		343.09
Account No. Franchise Tax Board Special Procedures PO Box 2952 Sacramento, CA 95812		J	2000, 2001, 2002 Income Tax					9,197.90
Account No. 2313181 Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		w	Collection Agent for Gabilan Radiology Medical Group					517.00
Account No. 2331988 Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		w	Collection Agent for Gabilan Radiology Medical Group					276.00
Sheet no. 14 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t		tota)	10,333.99

In re	Larry David Johns,
	Livian Lofranco Joh

Case No.		

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 7 H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZT ZGEZT	UNLIQUIDATE		AMOUNT OF CLAIM
Account No. 2745206			Collection Agent for Gabilan Radiology	'	E		
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		w	Medical Group		D		230.00
Account No. 3100124		П	Collection Agent for South Valley Imaging Llc				
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		w					
							107.00
Account No. 2784587	-	Н	Collection Agent for Quest	\vdash	-		
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J	<u>-</u>				
						L	0.00
Account No. 2776844			Collection Agent for Quest				
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J					
					Ш	L	0.00
Account No. 2770286			COllection Agent for Gabilan Radiology				
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J					0.00
		Ш		Ļ			0.00
Sheet no. 15 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th		otal pagi		337.00

In re	Larry David Johns,	Case No.
	Livian Lofranco Johns	

CREDITOR'S NAME,	Ċ	Hu	sband, Wife, Joint, or Community		c	Ų	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	1	42m0z-4200	21100104		AMOUNT OF CLAIM
Account No. 1983539			Collection Agent for Quest		Т	T E		
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J						0.00
Account No. 3383031		\vdash	Collection Agent for Quest		_	<u> </u>	<u> </u>	
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J						
					_			0.00
Account No. 3406948			Collection Agent for Quest					
Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711		J						
		:						0.00
Account No.			Medical Services					
Gabilan Radiology Medical Group 9400 N Name Uno Gilroy, CA 95020		J						
								0.00
Account No. 6008897673048919			Opened 6/02/78 Last Active 7/01/95 Credit Card Debt (Unsecured)					
Gemb/JC Penny Attention: Bankruptcy Po Box 103104		J						
Roswell, GA 30076								0.00
Sheet no. 16 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Tota			ota pag		0.00

In re	Larry David Johns,	Case No.
	Livian Lofranco Johns	

CREDITORICALAND	С	Н	sband, Wife, Joint, or Community	Τc	: [J [<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCUIDED AND				AMOUNT OF CLAIM
Account No. 346256452			Medical Services	٦Ϋ	i j	?	
Good Samaritan Hospital 2425 Samaritan Drive San Jose, CA 95110		J				0	481.86
Account No. 342509417			Medical Services	+	+	╁	
Good Samaritan Hospital P.O. Box 740766 Cincinnati, OH 45274-0766		J					110.30
Account No. H05000022066			Medical Services		╁	╬	
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J					
				\perp			0.00
Account No. H00001109489 Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J	Medical Services				0.00
Account No. H00001346534			Medical Services	+	╁	-	
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J					0.00
Sheet no. 17 of 28 sheets attached to Schedule of				 Subi	L tot:	1 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				592.16

Software Copyright (c) 13-50253 Doc#1 Filed: 01/15/13 Entered: 01/15/13 17:11:40 Page 39 of 88 Best Case Bankruptcy

In re	Larry David Johns,
	Livian Lofranco Johns

Case No.		

CREDITOR'S NAME,	Ç	Нυ	sband, Wife, Joint, or Community	ļç	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	002F-20m2	08-1-00-04-mp	DISPUTED	AMOUNT OF CLAIM
Account No. E13138			Medical Services	T	E	İ	
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J			ט		0.00
Account No. E13124	H	┢	Medical Services	1			
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J					
						L	0.00
Account No. E35133 Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J	Medical Services		···		0.00
Account No. H00001026488		П	Medical Services		П		
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J					0.00
Account No. H05000029337		H	Medical Services	\vdash		<u> </u>	
Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023		J					0.00
Sheet no. 18 of 28 sheets attached to Schedule of		لــــــ		Subt	otal	 I	0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his p	ag	e)	0.00

In	re

Lar	ry Da	، avid	John	s,
Livi	an L	ofrar	ico J	ohns

Case No.	

	1 -	1		т.	T	-	T
CREDITOR'S NAME,	Ö	Hu	sband, Wife, Joint, or Community	- 6	N	۱'n	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C 1 M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ロロストースの田スト		DISPUTED	AMOUNT OF CLAIM
Account No.			Medical Services	T	E		
Hollister Emergency Physicia P.O. Box 8350 Philadelphia, PA 19101-8350		J			D		577.00
Account No. 5155990081781274		Г	Opened 8/04/10 Last Active 9/09/10	Ì			
Hsbc Bank Po Box 5253 Carol Stream, IL 60197		w	Credit Card Debt (Unsecured)				381.77
Account No. 5155970022278945			Opened 11/29/07 Last Active 4/08/08	T	┢	T	
Hsbc Bank Po Box 5253 Carol Stream, IL 60197		Н	Credit Card Debt (Unsecured)				386.98
Account No. 5155970022246959	· ·		Opened 11/29/07 Last Active 4/08/08			Г	
Hsbc Bank Po Box 5253 Carol Stream, IL 60197		w	Credit Card Debt (Unsecured)				413.97
Account No.			Collection Agent for Washington Mutual Bank				
Hudson & Keyse, LLC 382 Blackbrook Road Painesville, OH 44077		J					0.00
Sheet no. 19 of 28 sheets attached to Schedule of				ubt			1,759.72
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis	pag	(c)	

Ī	п	re

Larry	David Joh	пs,
Liviar	Lofranco	Johns

Case No.	
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Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CDEDITODIC MAME	Ç	Нυ	sband, Wife, Joint, or Community	ļč	JZL	ם	
CREDITOR'S NAME, MAILING ADDRESS	CODEBTOR	н	DATE CLAIM WAS INCURRED AND	HZOO	L	100	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	H	N M	CONSIDERATION FOR CLAIM. IF CLAIM	11	a u	U T E	AMOUNT OF CLAIM
(See instructions above.)	o R	c	IS SUBJECT TO SETOFF, SO STATE.	ZGEZ	1	E	, moon or elimin
Account No.			1999 Income Tax	₽			
Account No.			Too moonia tax	L	D		
Internal Revenue Service							
PO Box 7346		J					
Philadelphia, PA 19101-7346							
							792.43
Account No.			2001 Income Tax				
Internal Revenue Service							
PO Box 7346		J					
Philadelphia, PA 19101-7346							
							15,536.04
Account No.			2000 Income Tax	Γ			
Internal Revenue Service		J					
PO Box 7346 Philadelphia, PA 19101-7346		J					
i madelpina, i A 10101 1010							
							29,709.94
Account No.			2002 Income Tax				
Internal Revenue Service							
PO Box 7346		J					
Philadelphia, PA 19101-7346							
							2,294.53
Account No. JOHNS0000			Medical Services			-	
leal Vaunger MD							
Joel Younger, MD P.O. Box 1300		J					:
Aptos, CA 95001-1300							
							415.86
Sheet no. 20 of 28 sheets attached to Schedule of				Subt			48,748.80
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	40,140,00

In re	Larry David Johns,	Case No.	
	Livian Lofranco Johns		
		Debtors	

CDEDITOR'S NAME	C	H	isband, Wife, Joint, or Community	Τç	Ţυ	<u> </u>	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		COXF-XGEX	N L C D L D A		AMOUNT OF CLAIM
Account No.			Medical Services	T	T E		
Lawrence J. Grace, MD 501 San Benito St, Suite 201 Hollister, CA 95023-5784		j					67.15
Account No. 19821	-		Medical Services	+-	╬	-	
Leon Lubianker, MD 9460 No Name Uno #210 Gilroy, CA 95020	•	J					54.47
Account No. 2909602			Opened 11/01/11	╫	\dagger	+	
Lhr Inc 56 Main St Hamburg, NY 14075		Н	Collection Agent for Capital Card Services				437.00
Account No.	_	╁	Collection Agent for Legacy Visa	+			
LHR Inc 56 Main Street Hamburg, NY 14075-4905		J					0.00
Account No. 21593672	\vdash	 	Medical Services	+		\dagger	
Lucile Packard Children's Hospital PO Box 660064 Dallas, TX 75266-0064		J					866.98
Sheet no. 21 of 28 sheets attached to Schedule of		1		Sub	tot	al	1,425.60
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)	1,72,0,00

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Larry	David	Joh	ns,
Livian	Lofra	псо	Johns

Case No.		

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	Ç	U	ſ	ēΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZH-ZGWZH				AMOUNT OF CLAIM
Account No. 62427802			Medical Services	Ť	Ť			
Lucile Packard Children's Hospital PO Box 742039 Los Angeles, CA 90074-2039		J			D			175.37
Account No.	<u> </u>		Collection Agent for HSBC			t	\dagger	
Malcom S. Gerald 332 South Michigan Ave, Ste 600 Chicago, IL 60604		J						0.00
Account No. 7Gl37682			Opened 6/01/07 Last Active 7/01/09		Г	Ť	T	
MCI Cas Dept 500 Technology Dr Weldon springs, MO 63304		Н	Services Rendered					772.00
Account No.			Medical Services			┢	\dagger	
Myriad Genetic Patient Accounts 320 Wakara Way Salt Lake City, UT 84108		J			1 1000			239.64
Account No. 1908730 0048299		\dashv	Collection Agent for Hollister Emergency	H		┞	+	
National Recovery Agency PO Box 67015 Harrisburg, PA 17106-7015		J						0.00
Sheet no. 22 of 28 sheets attached to Schedule of			S	ubto	otal	1	T	1,187.01
Creditors Holding Unsecured Nonpriority Claims			(Total of the	is p	age	c)	L	1,101.01

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ı n	

Larry David Johns, Livian Lofranco Johns

Case No.	

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

							.,	
CREDITOR'S NAME,	Ç	ΗL	sband, Wife, Joint, or Community] č	Ü	P		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	n H M	IS SUBJECT TO SETOFF, SO STATE.	120mz	DZ1-GD-DKFED	SPUTED	AM	OUNT OF CLAIM
Account No. QTS401			Collection Agent for AT&T		T E		İ	
NCO Financial Systems PO Box 15391 Wilmington, DE 19850-5391		J			D			0.00
Account No. 41484600		H	Collection Agent for Good Samaritan Hospital	╁	-	Ι-	 	
NCO Financial Systems PO Box 15537 Wilmington, DE 19850		J	3					0.00
		<u> </u>					ļ	0.00
Account No. 19087300048299 NCO Financial Systems P.O. Box 17095 Wilmington, DE 19850-7095		J	Collection Agent for Hollister Emergency Physician					577.00
Account No. 61562906201.1			Medical Services	┢				
Oconnor Imaging Medical Group PO Box 45072 San Francisco, CA 94145-5072		J						31.73
Account No.			Collection Agent for Washington Mutual Bank	\vdash	\vdash	┢	†	
Peachtree Law Center 6075 Roswell Road, NE Ste 118 Atlanta, GA 30328		J			· · · · · · · · · · · · · · · · · · ·			0.00
Sheet no. 23 of 28 sheets attached to Schedule of					ota			608.73
Creditors Holding Unsecured Nonpriority Claims			(Total of t	าis	pag	e)		000.75

Creditors Holding Unsecured Nonpriority Claims

In re	Larry David Johns,		Case No.
	Livian Lofranco Johns		
		Debtors	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR しつ ストース のきなし CREDITOR'S NAME, MAILING ADDRESS Н DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. w INCLUDING ZIP CODE. C AMOUNT OF CLAIM AND ACCOUNT NUMBER (See instructions above.) Account No. 21593672 Collection Agent for Lucile Packard Children's Hospital PFS Group 7670 Woodway Dr, Ste 250 Houston, TX 77063-1519 0.00 Account No. JK10091 Opened 10/01/10 Collection Agent for Verizon Wireless Pinnacle Credit Service Н Po Box 640 Hopkins, MN 55343 278.00 Account No. 5155970022246959 Opened 5/01/09 Collection Agent for Hsbc Card Services Iii Inc. Portfolio Recovery W Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 616.00 Account No. 5155990081781274 Opened 10/01/11 Collection Agent for Hsbc Bank Nevada N.A. Portfolio Recovery W Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541 382.00 Account No. Medical services **Quest Diagnostic** P.O. Box 78406 Phoenix, AZ 85062-8406 186.18 Sheet no. 24 of 28 sheets attached to Schedule of Subtotal 1,462.18

(Total of this page)

In re	Larry David Johns,
	Livian Lofranco Johns

Case No.	

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

				,			
CREDITOR'S NAME,	ő	Hu	sband, Wife, Joint, or Community	18	U N	P	
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	0021-	I L	l s	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	N M	CONSIDERATION FOR CLAIM, IF CLAIM	I N	ū	PUTE	AMOUNT OF CLAIM
(See instructions above.)	CODEBTOR	c	IS SUBJECT TO SETOFF, SO STATE.	Ğ	1 1	1 =	AMOUNT OF CLAIM
Account No. 8IZ4379570	Ë	\vdash	Medical Services	ZGEZT	DATED	_	
					Ď		
Quest Diagnostics				Г			Ì
PO Box 7306		J				l	
Hollister, MO 65673-7306]					
				Ι,			
							158.00
Account No. 808R489724			Opened 12/01/09		П		
			Collection Agent for Crossings Book Club				
Rjm Acq Llc							
575 Underhill Blvd.		W					
Suite 224						i	
Syosset, NY 11791		l					
							42.00
Account No. 34889648			Collection Agent for Pinnacle Credit Services		\Box		
			-				
RPM						. !	
20816 44th Ave W		J					
Lynnwood, WA 98036							
		ı					
							0.00
Account No. H00006430219			Medical Services		П	\neg	
Spirit Louise Beginnel Heavitel				İ			
Saint Louise Regional Hospital P.O. Box 61000 Loc. 73767		J					
San Francisco, CA 94161-0001		٦					
oun runologo, on sanonogo,							
		l					195.84
Account No. H00006808927	\neg		Medical Services	H	\dashv	\dashv	
					ļ	-	
Saint Louise Regional Hospital	ĺ				- [
P.O. Box 61000 Loc. 73767	ŀ	٦ļ					
San Francisco, CA 94161-0001					İ		
]						240.50
Sheet no. 25 of 28 sheets attached to Schedule of			S	ubto	ital	\exists	020.04
Creditors Holding Unsecured Nonpriority Claims			(Total of th	is p	age	:)	636.34

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Larry	David Joh	ns,
Livian	Lofranco	Johns

Creditors Holding Unsecured Nonpriority Claims

Case No.		
· · · · · · · · · · · · · · · · · · ·		

(Total of this page)

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community 227-02-04-80 ロロストースのビスト CREDITOR'S NAME, Н MAILING ADDRESS DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM INCLUDING ZIP CODE W AMOUNT OF CLAIM AND ACCOUNT NUMBER J IS SUBJECT TO SETOFF, SO STATE. C (See instructions above.) Account No. 78003 **Medical Services** San Benito Health Foundation 351 Felice Drive Hollister, CA 95023-3361 20,00 Account No. 803626060384A Opened 12/01/07 Last Active 4/15/08 Credit Card Debt (Unsecured) Seventh Ave Н 1112 7th Ave Monroe, WI 53566 233.00 Collection Agent for Topstyler Account No. 79228 SKO Brenner American J 40 Daniel Street PO Box 230 Farmingdale, NY 11735-0230 269.85 Collection Agent for Verizon Wireless Account No. Stephens & Michaels Associates PO Box 109 Salem, NH 03079-0109 0.00 Account No. David JOhns Services Rendered Teach Social 3550 Stevens Creek Blvd. #200 San Jose, CA 95117 475.00 Sheet no. 26 of 28 sheets attached to Schedule of Subtotal 997.85

In re	
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Larry	David Joh	ıns,
Livian	Lofranco	Johns

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	С	Ш	sband, Wife, Joint, or Community	Τċ	Τü	Пп	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODESTOR	H M J C	DATE CLAIM WAS INCURRED AND	COZH-ZGWZ	1 L		AMOUNT OF CLAIM
Account No. 803626060384A			Credit Card Debt (Unsecured)	T	ΙĒ		
The Swiss Colony 1112 7th Ave Monroe, WI 53566-1364		J			D		219.77
Account No. 4352376709988786	 		Opened 11/01/05 Last Active 4/08/11	╫	╁	╁	
Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV P.O.Box 9475 Minneapolis, MN 55440		w	Credit Card Debt (Unsecured)		· · · · · · · · · · · · · · · · · · ·		0.00
Account No.			Collection Agent for Myriad Genetic	T		<u> </u>	
Transworld Systems 2235 Mercury Way, #275 Santa Rosa, CA 95407		J					0.00
Account No. 4311729-7	\vdash		Collection Agent for NSA Juice Plus ARO CC	+	\vdash	╁	
Universal Collection Systems PO Box 751090 Memphis, TN 38175-1090		J					0.00
Account No.	<u> </u>	-	Medical Services	+	-	 	
Valley Radiology Medical Assoc PO Box 49058 San Jose, CA 95161-9058		J					25.87
Cl. 1 CT. of CD. shows the had a C. had a large				Sub	tota	<u></u>	
Sheet no. 27 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of				245.64

In re	Larry David Johns,	Ca	ase No.
	Livian Lofranco Johns	_	

	С	Hi	sband, Wife, Joint, or Community	Τc	Τυ	Τp	<u> </u>
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	1 C H M H	DATE OF THE WAS DISHIBLD AND	COZH_ZGEZH	1	SPUTED	AMOUNT OF CLAIM
Account No.	Γ		Services Rendered	٦	A T E D		
Verizon California P.O. Box 9688 Mission Hills, CA 91346-9688		J			D		0.00
Account No.			Services rendered	T	Т		
Waste Management PO Box 79168 Phoenix, AZ 85062-9168		J					
							149.58
Account No. 17218761 West Asset 2703 North Highway 75 Sherman, TX 75090		w	Opened 7/01/12 Collection Agent for Good Samaritan Hospital				
							62.00
Account No.							
Account No.							
Sheet no. 28 of 28 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		S (Total of th	ubto			211.58
			(Report on Summary of Sc	To	otal	l	108,091.13

In re	Larry David Johns,
	Livian Lofranco Johns

Case No.		

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Larry David Johns, Livian Lofranco Johns

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

L	įν	ria	n	Lo	fra	n	CO	J	0	hr	าร	

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	or's Marital Status: DEPENDENTS OF DEBTOR					
Married	RELATIONSHIP(S): Son					
Employment:	DEBTOR	<u> </u>		SPOUSE		
Occupation Ma	aintenance Tech					
Name of Employer Ma	arich Confectionery	IHSS				
How long employed 1 y	year					
	11 Bert Drive ollister, CA 95023					
INCOME: (Estimate of average or pro	jected monthly income at time case filed)			DEBTOR		SPOUSE
	mmissions (Prorate if not paid monthly)		\$	4,749.98	\$ _	1,993.43
2. Estimate monthly overtime			\$ <u> </u>	0.00	\$ _	0.00
3. SUBTOTAL			\$	4,749.98	\$_	1,993.43
4. LESS PAYROLL DEDUCTIONS						
 Payroll taxes and social securit 	у		\$	964.04	\$	154.82
b. Insurance			\$	140.31	s	0.00
c. Union dues			\$	0.00	\$ _	30.66
d. Other (Specify): 401(K)			\$	237.50	S _	0.00
***************************************			\$	0.00	\$ _	0.00
5. SUBTOTAL OF PAYROLL DEDU	CTIONS		\$	1,341.85	<u> </u>	185.48
6. TOTAL NET MONTHLY TAKE H	OME PAY		\$	3,408.13	\$_	1,807.95
7. Regular income from operation of be	ısiness or profession or farm (Attach detailed state	ment)	\$	0.00	\$	0.00
8. Income from real property			s <u> </u>	0.00	\$ _	0.00
9. Interest and dividends			\$	0.00	\$	0.00
 Alimony, maintenance or support p dependents listed above Social security or government assis 	ayments payable to the debtor for the debtor's use	or that of	\$	0.00	s _	0.00
(Specify):	Tance		\$	0.00	\$	0.00
			s —	0.00	- \$ -	0.00
12. Pension or retirement income			\$	0.00	<u> </u>	0.00
13. Other monthly income				0.00	~ –	3.55
(Specify):			\$	0.00	\$	0.00
			\$	0.00	s <u> </u>	0.00
14. SUBTOTAL OF LINES 7 THROU	GH 13		s	0.00	<u> </u>	0.00
15. AVERAGE MONTHLY INCOME	(Add amounts shown on lines 6 and 14)		\$	3,408.13	\$_	1,807.95
16. COMBINED AVERAGE MONTH	15)		\$	5,216	.08	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

^{17.} Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Off	icial Form 6J) (12/07)
	Larry David Johns
In re	Livian Lofranco Johns

n re	Livian Lofranco Johns	 ise No.		
			 	_

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of

expenditures labeled "Spouse."		
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,275.00
a. Are real estate taxes included? Yes No _X	,	
b. Is property insurance included? Yes No X		
2. Utilities: a. Electricity and heating fuel	\$	218.00
b. Water and sewer	\$	0.00
c. Telephone	\$	225.00
d. Other See Detailed Expense Attachment	\$	142.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	1,000.00
5. Clothing	\$	300.00
6. Laundry and dry cleaning	\$	150.00
7. Medical and dental expenses	\$	200.00
8. Transportation (not including car payments)	\$	575.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	300.00
10. Charitable contributions	\$	80.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	28.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	200.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	s	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	s	0.00
17. Other Incidentals (hair cuts, hygiene, etc.)	\$	300.00
Other Educational Expenses	\$	147.92
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	5,140.92
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	•	
20. STATEMENT OF MONTHLY NET INCOME	-	•
a. Average monthly income from Line 15 of Schedule I	\$	5,216.08
b. Average monthly expenses from Line 18 above	\$	5,140.92
c. Monthly net income (a. minus b.)	\$	75.16

B6J (Offi	cial Form 6J) (12/07)
	Larry David Johns
In re	Livian Lofranco Johns

Larry David Collins			
Livian Lofranco Johns		Case No.	

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Detailed Expense Attachment

Cable	\$ 75.00
Garbage	\$ 67.00
Total Other Utility Expenditures	\$ 142.00

B6 Declaration (Official Form 6 - Declaration). (12/07)

Larry David Johns

United States Bankruptcy Court Northern District of California

In re	n re Livian Lofranco Johns			Case No.			
			Debtor(s)	(Chapter	13	
	DECLARATION C	CONCERN	ING DEBT	'OR'S SCE	IEDUL	ES	
	DECLARATION UNDER	PENALTY C	F PERJURY I	BY INDIVID	UAL DEI	3TOR	
	I declare under penalty of perjury the sheets, and that they are true and correct to the sheets.	hat I have rea he best of my	d the foregoin knowledge, in	g summary an nformation, an	d schedul id belief.	es, consisting of <u>42</u>	
Date _	01/14/13	Signature <	Larry David	Johns oh			
Date _	1/14/13	Signature	Livian Lofrar	Jh			

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Joint Debtor

United States Bankruptcy Court Northern District of California

In re	Larry David Johns Livian Lofranco Johns		Case No.	
	,	Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT \$2,153.84	SOURCE 2013 Wages
\$54,221.61	2012 Wages
\$74,948.60	2011 Wages \$64,574.00 Contract 1099 Income \$10,374.60
\$94,181.00	2010 Wages \$85,026.00 Contract 1099 Income \$9,155.00
\$996.45	2013 Wages (W)
\$1,993.95	2012 Wages (W)
\$0.00	2011 Wages (W)
\$16.00	2010 Wages (W)

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

 \sqrt{c}

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850°. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION
OF COURT
CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

3

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Law Offices of David A. Boone 1611 The Alameda San Jose, CA 95126 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
Pursuant to 2016(b) Statement

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

5

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL

CE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

100

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None
a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date _	01/14/13	Signature Farry Dal
	i, r	Larry David Johns (/
	1/11/12	Debtor/
Date	1/14/17	Signature // / /
	·	Livian Lofranco Johns
		Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to

proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy CourtNorthern District of California

In re	Livian Lofranco Johns			Case No.	
		Deb	tor(s)	Chapter	13
	CERTIFICATION OF NOTIC UNDER § 342(b) OF T				R(S)
	Certificat I (We), the debtor(s), affirm that I (we) have received an			as required	by § 342(b) of the Bankruptcy
	Pavid Johns	v	\mathcal{A}_{i} 10.1		adula.
	Lofranco Johns Name(s) of Debtor(s)	А	Signature of Debtor		Date
Case N	o. (if known)	х	liv Jra	~	1/14/13
	-		Signature of Joint Do	ebtor (if any) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

In Re: Larry David Johns & Livian Lofranco Johns

Case No. Chapter 13

DISCLOSURE OF COMPENSATION -- Rule 2016 (b)

- 1. Pursuant to 11 U.S.C. §329(a) and Bankruptcy Rule 2016(b), I certify that the attorneys for the Debtor(s) are Law Offices of David A. Boone, that I am authorized to make this certification and that I am an active member of the California State Bar. I certify that compensation paid within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a minimum \$4000.00 of which \$0.00 has been paid.
 - 2. The source of the compensation paid, or to be paid to me was the debtor.
- 3. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- 4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation and rendering advise to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

e. Other provisions:

All services to be provided herein are to be earned at hourly rates of between \$285.00 and \$450.00 for attorneys and between \$150.00 and \$250.00 per hour for any law clerks and paralegals. Hourly rates may change from time to time during the pending of the case but only after written notice.

Law Offices of David A. Boone

Dated: 1/4/2013

David A. Boone, Esq. Attorney for Debtor(s)

/s/ David A. Boone

United States Bankruptcy Court Northern District of California

In re	Larry David Johns Livian Lofranco Johns		Case No.	
		Debtor(s)	Chapter	13
	<u>CRED</u>	ITOR MATRIX COVER SH	<u>IEET</u>	
	I declare that the attached Creditor Mailir and addresses of all priority, secured and ur promulgated requirements.			
Date:	1/14/2013.	/s/ David A. Boone Signature of Attorney David A. Boone 74165 Law Offices of David A. Boone 1611 The Alameda San Jose, CA 95126 408-291-6000 Fax: 408-291-60		·····

Accounts Receivable Management PO Box 129 Thorofare, NJ 08086-0129

AFNI, Inc 404 Brock Drive PO Box 3517 Bloomington, IL 61702-3517

Allergy and Asthma Associates 4050 Moorpark Ave San Jose, CA 95117-1840

Allied Interstate 3000 Corporate Exchange Dr, 5th Floor Columbus, OH 43231

American Medical Collection Agency PO Box 1235 Elmsford, NY 10523-0935

American Medical Response P.O. Box 3429 Modesto, CA 95353

Aslam Barra, MD 930 Sunnyslope Rd, #E1 Hollister, CA 95023

AT&T P.O. Box 78522 Phoenix, AZ 85062-8522

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Balanced Healthcare Receivables PO Box 9577 Manchester, NH 03108-9577

Barclays Bank Delaware Attention: Bankruptcy Po Box 1337 Philadelphia, PA 19101

Bay Area Credit Service 1901 W. 10th St Antioch, CA 94509

Board of Equalization, State of CA Acct Analysis Ctrl Sec MIC: 29 P.O. Box 92879 Sacramento, CA 94279-0029

Board of Equalization, State of CA Acct Analysis Ctrl Sec MIC: 29 P.O. Box 92879 Sacramento, CA 94279-0029

Bonded Collection Corp PO Box 1022 Wixom, MI 48393-1022

Bryant Hodge & Associates 20 State St, Ste 100 Bangor, ME 04401

CalPath Medical Associates PO Box 54066 San Jose, CA 95154

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Calvin Clarke DDS 890 Sunset Dr, Ste A-1B Hollister, CA 95023-5061

Capio Partners Llc 2222 Texoma Pkwy Ste 150 Sherman, TX 75090

Capital One Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130

Cbc/credit Consulting Po Box 5879 Salinas, CA 93915

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Cbc/credit Consulting Po Box 5879 Salinas, CA 93915

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CBCS PO Box 163250 Columbus, OH 43216-3250

CBSJ Financial Corp Department 370 PO Box 4115 Concord, CA 94524

Cbsj Financial Corp. 99 W Tasman Dr San Jose, CA 95134

CBSJ Financial Corp. 99 W. Tasman Drive Suite 205 San Jose, CA 95134

CBSJ Financial Corp. P.O. Box 512020 Los Angeles, CA 90051-0020

CBSJ Financial Corp. 99 W. Tasman Drive Suite 205 San Jose, CA 95134

CBSJ Financial Corp. 299 Stockton Avenue San Jose, CA 95126

Charter Communications 8120 Camino Arroyo Gilroy, CA 95020-7304

Chase

Attn: Bankruptcy Dept

Po Box 15298

Wilmington, DE 19850

Chase Manhattan Bank Attention: Bankruptcy Po Box 15298 Wilmington, DE 19850

Collection Bureau of America P.O. Box 5013 Hayward, CA 94540-5013

Computer Collections 640 West Fourth Street PO Box 5238 Winston Salem, NC 27113-5238

Credit Collection Services Two Wells Ave Newton Center, MA 02459

Credit Consulting Services P.O. Box 5879 Salinas, CA 93915

Credit Protection Associations Attn: Bankruptcy Po Box 802068 Dallas, TX 75380

Crossings Book Club P.O. Box 916432 Indianapolis, IN 46291-6432

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Cypress Collection Services PMB -184 3900 Peland Ave, #420 Modesto, CA 95356

David R Flemming MD 757 Pacific St Monterey, CA 93940-2819

E R Solutions, Inc. P.O. Box 9004 Renton, WA 98057-9004

Endoscopy Surgery Center of Silicon Valley LLC 2410 Samaritan Drive, Ste 100 San Jose, CA 95124

Enhanced Recovery Corp Attention: Client Services 8014 Bayberry Rd Jacksonville, FL 32256

FC&A PO Box 2062 Peachtree City, GA 30269-0062

Financial Credit Network 1300 W. Main Street Visalia, CA 93278

Fncc/Legacy Visa Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117

Franchise Tax Board Special Procedures PO Box 2952 Sacramento, CA 95812

Franchise Tax Board Special Procedures PO Box 2952 Sacramento, CA 95812

Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711

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Fresno Credit Bureau 2600 W Shaw Ln Fresno, CA 93711

Gabilan Radiology Medical Group 9400 N Name Uno Gilroy, CA 95020

Gemb/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076

Good Samaritan Hospital 2425 Samaritan Drive San Jose, CA 95110

Good Samaritan Hospital P.O. Box 740766 Cincinnati, OH 45274-0766

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Hazel Hawkins Memorial Hosp. 911 Sunset Drive Hollister, CA 95023

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Hollister Emergency Physicia P.O. Box 8350 Philadelphia, PA 19101-8350

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

Hudson & Keyse, LLC 382 Blackbrook Road Painesville, OH 44077

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

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Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Joel Younger, MD P.O. Box 1300 Aptos, CA 95001-1300

Lawrence J. Grace, MD 501 San Benito St, Suite 201 Hollister, CA 95023-5784

Leon Lubianker, MD 9460 No Name Uno #210 Gilroy, CA 95020

Lhr Inc 56 Main St Hamburg, NY 14075

LHR Inc 56 Main Street Hamburg, NY 14075-4905

Lucile Packard Children's Hospital PO Box 660064 Dallas, TX 75266-0064

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Lucile Packard Children's Hospital PO Box 742039 Los Angeles, CA 90074-2039

Malcom S. Gerald 332 South Michigan Ave, Ste 600 Chicago, IL 60604

MCI Cas Dept 500 Technology Dr Weldon springs, MO 63304

Myriad Genetic Patient Accounts 320 Wakara Way Salt Lake City, UT 84108

National Recovery Agency PO Box 67015 Harrisburg, PA 17106-7015

NCO Financial Systems PO Box 15391 Wilmington, DE 19850-5391

NCO FInancial Systems PO Box 15537 Wilmington, DE 19850

NCO Financial Systems P.O. Box 17095 Wilmington, DE 19850-7095

Oconnor Imaging Medical Group PO Box 45072 San Francisco, CA 94145-5072

Peachtree Law Center 6075 Roswell Road, NE Ste 118 Atlanta, GA 30328

PFS Group 7670 Woodway Dr, Ste 250 Houston, TX 77063-1519

Pinnacle Credit Service Po Box 640 Hopkins, MN 55343

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Quest Diagnostic P.O. Box 78406 Phoenix, AZ 85062-8406

Quest Diagnostics PO Box 7306 Hollister, MO 65673-7306

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Rjm Acq Llc 575 Underhill Blvd. Suite 224 Syosset, NY 11791

RPM 20816 44th Ave W Lynnwood, WA 98036

Saint Louise Regional Hospital P.O. Box 61000 Loc. 73767 San Francisco, CA 94161-0001

Saint Louise Regional Hospital P.O. Box 61000 Loc. 73767 San Francisco, CA 94161-0001

San Benito Health Foundation 351 Felice Drive Hollister, CA 95023-3361

Seventh Ave 1112 7th Ave Monroe, WI 53566

SKO Brenner American 40 Daniel Street PO Box 230 Farmingdale, NY 11735-0230

State of California - EDD Bankruptcy Unit - MIC 92E PO Box 826880 Sacramento, CA 94280

Stephens & Michaels Associates PO Box 109 Salem, NH 03079-0109

Teach Social 3550 Stevens Creek Blvd. #200 San Jose, CA 95117

The Swiss Colony 1112 7th Ave Monroe, WI 53566-1364

Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV P.O.Box 9475 Minneapolis, MN 55440

Transworld Systems 2235 Mercury Way, #275 Santa Rosa, CA 95407

U.S. Attorney General Civil Trial Sec. Western PO Box 683 Ben Franklin Washington, DC 20044

United States Attorney's Office Attn: Chief Tax Division 450 Golden Gate Ave. 10th San Francisco, CA 94102

Universal Collection Systems PO Box 751090 Memphis, TN 38175-1090

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Valley Radiology Medical Assoc PO Box 49058 San Jose, CA 95161-9058

Verizon California P.O. Box 9688 Mission Hills, CA 91346-9688

Waste Management PO Box 79168 Phoenix, AZ 85062-9168

West Asset 2703 North Highway 75 Sherman, TX 75090